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FACSIMILE TRANSMITTAL SHEET

FIRM/COMPANY: USPTO

FACSIMILE NUMBER: 571-273-8300

**CONFIRMATION
TELEPHONE:**

FROM: PAUL A. SCHWARZ, ESQ.

DIRECT DIAL: 609.631.2491

DATE: February 21, 2006

FILE : ATTORNEY DOCKET NO.: IMPLEX-18/ZM0718
APPLICATION SERIAL NO. 10/015,365
FILED: 12/13/2001
ART UNIT: 3732

TOTAL # OF PAGES: 17
(INCLUDING COVERSHEET)

Message: Please see attached.

NOTE: Original will NOT follow.

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Roble, et al.

Docket No.

Implex-18/ZM0718

Application No.
10/015,365Filing Date
12/13/2001Examiner
Candice C. StokesGroup Art Unit
3732

Invention: INSTRUMENT AND SYSTEM FOR PREPARING THE DISC SPACE BETWEEN TWO VERTEBRAL BODIES

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I hereby certify that this Amendment and Response, with Transmittal Letter
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(Date)

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(Signature)

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AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. Implex-18/ZM0718				
Applicant(s): Robie, et al.		Examiner Candice C. Stokes		Customer No. 28581		Group Art Unit 3732		Confirmation No. 2786	
Invention: INSTRUMENT AND SYSTEM FOR PREPARING THE DISC SPACE BETWEEN TWO VERTEBRAL BODIES									
<u>COMMISSIONER FOR PATENTS:</u>									
Transmitted herewith is an amendment in the above-identified application.									
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27									
The fee has been calculated and is transmitted as shown below.									
CLAIMS AS AMENDED									
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST # PREV. PAID FOR		NUMBER EXTRA CLAIMS PRESENT		RATE		ADDITIONAL FEE	
TOTAL CLAIMS		35 -		45 =		0		X \$25.00	
INDEP. CLAIMS		5 -		6 =		0		X \$100.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/> \$0.00									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2061 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
Dated: February 21, 2006									
 <i>Signature</i> Paul A. Schwarz Registration No. 37,577									
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) Signature of Person Mailing Correspondence Typed or Printed Name of Person Mailing Correspondence </div>									
cc: -									

Attorney Docket No. Implex-18/ZM0718

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of: : Group Art Unit: 3732
Robie, et al. :
Serial No.: 10/015,365 : Examiner: Stokes, Candice C.
Filing Date: December 13, 2001 : Atty Dkt.: Implex-18/ZM0718
For: Instrument and System for : Date: February 21, 2006
Preparing the Disc Space
Between Two Vertebral Bodies :
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Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Va. 22313-1450

AMENDMENT AND RESPONSE

Dear Sir:

This paper is responsive to the Office Action dated December 1, 2005. Kindly enter the following amendments:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 11 of this paper.

DM2\649440.1